



REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

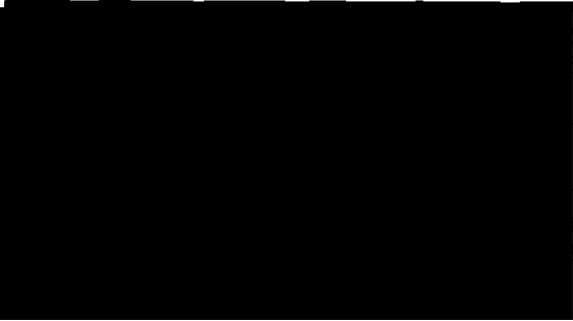
(CFA-4)  
Summary Sheet

|                                    |
|------------------------------------|
| FILE NUMBER                        |
| TOTAL PAGES IN ENTIRE CFA-4 REPORT |

INSTRUCTIONS: Please type or print legibly **IN BLACK INK** all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? ☐ Yes ☒ No

| COMMITTEE INFORMATION   |  |   |
|---|--|---|
| 1. Full Name of Committee (as on Statement of Organization) <input type="checkbox"/> Check if this is a new name<br>Committee for Dan Henke   |  |   |
| 2. Acronym or Abbreviated Name (if any)   |  | 3. Committee Telephone Number<br>( 317 ) 946-6618   |
| 4. Mailing Address (address where all campaign finance correspondence is received) <input type="checkbox"/> Check if this is a new address<br>13565 Courtney Dr.  |  |   |
| 5. City, State, ZIP Code<br>Fishers IN 46038  |  | 6. Party Affiliation (if applicable)<br>Republican  |
| CANDIDATE INFORMATION (For Candidate's Committees Only)   |  |   |
| 7. Full Name of Candidate (include any nickname)<br>Daniel E. Henke   |  | 8. Party Affiliation or If Independent Candidate<br>Republican                                    |
| 9. Office Sought (Include district number, if any. <b>Not required for exploratory committee.</b> )<br>Judge, Fishers City Court  |  | 10. County of Residence<br>Hamilton   |
| TYPE OF REPORT  |  | CONVENTION CANDIDATES ONLY  |
| 11. Check one:<br><input type="checkbox"/> Pre-Primary <input type="checkbox"/> Pre-Election <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other<br><input type="checkbox"/> Final/Disbands Committee (lines 18, 19, and 20 must be "0") <input type="checkbox"/> Outgoing Treasurer (within 10 days amend Statement of Organization) |  | Check one:<br><input type="checkbox"/> Pre-Convention<br><input type="checkbox"/> Post-Convention |
| 12. Reporting Period:<br>From: January 1, 2014 Through: December 31, 2014   |  | COLUMN A<br>This Period   |
| 13. Cash on hand and investments at the beginning of this reporting period.   |  | 1,393.73  |
| 14. Cash on hand and investments January 1, current year.   |  | 1,393.73  |
| CONTRIBUTIONS AND RECEIPTS  |  |   |
| (Note: these amounts include in-kind contributions and loans, as well as cash contributions.)   |  |   |
| 15a. Itemized (use Schedule A)  |  | 0.00  |
| 15b. Unitemized   |  | 0.00  |
| 15c. Add lines 15a and 15b in both columns SUBTOTAL   |  | 0.00  |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B TOTAL   |  | 1,393.73  |
| EXPENDITURES  |  |   |
| (Note: These amounts include in-kind expenditures and loan repayments.)   |  |   |
| 17a. Itemized (use Schedule B) (Public Question: use Schedule C)  |  | 0.00  |
| 17b. Unitemized   |  | 18.00   |
| 17c. Add lines 17a and 17b in both columns SUBTOTAL   |  | 18.00   |
| 18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) TOTAL   |  | 1,375.73  |
| 19. Debts OWED BY the committee (use Schedule D)  |  | 0.00  |
| 20. Debts OWED TO the committee (use Schedule E)  |  | 0.00  |



|   |                    |
|---|--------------------|
| DECLARATION   |                    |
| I, the undersigned, declare under penalty of perjury that the foregoing is true and correct. I declare under penalty of perjury that the foregoing is true and correct.   |                    |
| Title<br>Treasurer  | Date<br>01/17/2015 |
|   | Date<br>01/17/2015 |
| This form is not to be used for any commercial purpose. (IC 3-9-4-5) A person who knowingly<br>son who fails to file a complete or accurate report as required by the Indiana<br>and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18) |                    |

FOR OFFICE USE ONLY  
JAN 20 2015  
02 44 51  
02 44 51